



Docket No.: 08211/0200245-US0/P05600
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Bumha Lee et al.

Application No.: 10/623,149

Confirmation Number: 5195

Filed: July 18, 2003

Art Unit: 2819

For: METHOD AND APPARATUS OF SYSTEM
OFFSET CALIBRATION WITH
OVERRANGING ADC

Examiner: J. B. Nguyen

SUBMISSION OF FORMAL DRAWINGS

MS ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith is one set (thirteen sheets, thirteen figures) of formal drawings for filing in the above-identified patent application. Kindly substitute the enclosed formal drawings for the informal drawings submitted with the originally filed application.

Dated: August 6, 2004

Respectfully submitted,

By

Matthew M. Gaffney

Registration No.: 46,717

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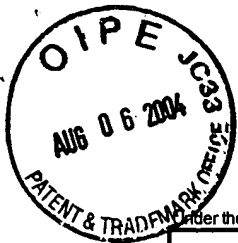
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/623,149-Conf. #5195
		Filing Date	July 18, 2003
		First Named Inventor	Bumha Lee
		Art Unit	2819
		Examiner Name	J. B. Nguyen
Total Number of Pages in This Submission	1	Attorney Docket Number	08211/0200245-US0/P05600

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Part B - Fee(s) Transmittal (1 page) Submission of Formal Drawings (1 page) Certificate of Express Mailing (1 page) Return Receipt Postcard (1) Check for \$1360.00 (1)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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Signature	
Date	August 6, 2004